



Atty. Dkt. No. 076565-0115

#29

Ext. of Time
AH

4/29/04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Davis et al.


Title: HERMETICALLY SEALED
COSMETIC COMPACT CASE

Appl. No.: 09/469,494

Filing Date: 01/04/2000

Examiner: Paul J. Hirsch

Art Unit: 3732

| | |
|--|-------------------|
| CERTIFICATE OF EXPRESS MAILING | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450. | |
| EV 431601213 US | 3/30/04 |
| (Express Mail Label Number) | (Date of Deposit) |
| Carolyn Simpson | |
| (Printed Name) | |
|  | |
| (Signature) | |

AMENDMENT TRANSMITTAL

Mail Stop Reissue
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

Also enclosed:

- [X] Form PTO/SB/52 (3 pages)
- [X] Form PTO/SB/53 (1 page)
- [X] Form PTO/SB/96 (1 page)
- [X] Copy of previously filed Document Recordation (Exhibit A).
- [X] Original Patent for U.S. Pat. No. 5,842,486

RECEIVED
APR 05 2004

TECHNOLOGY CENTER R3700

04/01/2004 AWONDAF1 00000124 09469494

01 FC:1253

950.00 OP

☒ The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | | Extra Claims Present | | Rate | | Additional Claims Fee |
|---|-------------------------|---|------------------------|---|----------------------------|---|---------|---|--------------------------|
| Total Claims: | 55 | - | 57 | = | 0 | x | \$18.00 | = | \$0.00 |
| Independent Claims: | 6 | - | 6 | = | 0 | x | \$86.00 | = | \$0.00 |
| First presentation of any Multiple Dependent Claims: + \$290.00 | | | | | | | | = | \$0.00 |
| CLAIMS FEE TOTAL | | | | | | | | = | \$0.00 |

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

| | | |
|--|------------|----------|
| <input type="checkbox"/> Extension for response filed within the first month: | \$110.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the second month: | \$420.00 | \$0.00 |
| <input checked="" type="checkbox"/> Extension for response filed within the third month: | \$950.00 | \$950.00 |
| <input type="checkbox"/> Extension for response filed within the fourth month: | \$1,480.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the fifth month: | \$2,010.00 | \$0.00 |
| EXTENSION FEE TOTAL: | | \$950.00 |
| <input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d): | \$110.00 | \$0.00 |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL: | | \$950.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above): | | \$0.00 |
| TOTAL FEE: | | \$950.00 |

☒ A check in the amount of \$950.00 is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith,

applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

3/30/04

By

Adam M. Gustafson

FOLEY & LARDNER LLP
777 East Wisconsin Avenue
Milwaukee, Wisconsin 53202-5306
Telephone: (414) 297-5652
Facsimile: (414) 297-4900

Adam M. Gustafson
Attorney for Applicant
Registration No. 54,601